02-23-07

PTO/SB/22 (07-06) Approved for use through 09/30/2006. OMB 0651-0031 Frademark Office; U.S. DEPARTMENT OF COMMERCE

, 	er the Paperwork Reduction Act of FION FOR EXTENSION			of information unless Docket Number	if displays a valid OMB control number (Optional)			
	FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			C	ytRx/009 DIV 2			
Applic	ation Number	10/618,162	2	Filed	July 10, 2003			
For	METHOD OF ENHANCI HYDROXYLAMINE DEF THE PREPARATION TH	RIVATIVES USEFUL	ODUCTION OF MOI FOR ENHANCING	ECULAR CHAPERO	PERON, ON PRODUCTION AND			
Art Ur	nit 1614			Examiner	Shirley Gembeh			
identif	s a request under the provied application.							
The re	equested extension and fe	e are as follows (ch						
	One month (37 CF	P 1 17(a)(1))	<u>Fee</u> \$120	Small Entity \$60	<u>Fee</u> \$			
			\$450	\$225	\$			
	Two months (37 Cl		·	\$510	\$			
	Three months (37 C		\$1020 \$1500					
	Four months (37 C	,	\$1590	\$795	\$ 1,000,00			
	x Five months (37 Cl	FR 1.17(a)(5))	\$2160	\$1080	\$ 1,080.00			
x	Applicant claims small entity status. See 37 CFR 1.27.							
	A check in the amount of the fee is enclosed.							
	Payment by credit card. Form PTO-2038 is attached.							
x	The Director has already been authorized to charge fees in this application to a Deposit Account.							
×	The Director is hereby a	credit any overpayment, to						
سا	Deposit Account Numbe	_	I have enclo					
Ιa	m the applicant	t/inventor.						
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
	x attorney	or agent of record.	Registration Number	55,66	1			
	attorney	or agent under 37 C	FR 1.34.					
		ation number if acting u			•			
	Wide-	75		Fe	bruary 21, 2007			
-		Signature			Date			
_	Erika Takeuchi			(212) 596-9479				
	• •	or printed name			ephone Number			
	TE: Signatures of all the inventors on one signature is required, see belo		e entire interest or their repre	esentative(s) are requi	red. Submit multiple forms if more			
x	Total of1	forms are subm	nitted.					
				02/26/2007 AL	IONDAF1 00000119 181945			

01 FC:2255

1080.00 DA

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV930025218US, on the date shown below in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: February 21, 2007

Signature: _

PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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Fees pursuant to the Consolidat	Application Nu	Application Number 10/618,162							
FEE TRA	Filing Date	July 10, 2003							
	First Named Inventor Laszlo Vig		aszlo Vigh	Vigh					
For	FY 200	15	Examiner Nam	e S	Shirley Gembeh				
X Applicant claims small	Art Unit 10		1614						
TOTAL AMOUNT OF PAY	Attorney Docket No. CytRx/009 DIV 2			′2					
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 06-1075 Deposit Account Name: Fish & Neave IP Group, Ropes & Gray LLP									
For the above-ident	ified deposit	account, the Director	is hereby authori:	zed to: (checl	k all that apply)				
x Charge fee(s)	indicated b	elow	Char	ge fee(s) indi	icated below, ex	ccept for the filing fee			
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH	, AND EXA	MINATION FEES	<u> </u>						
	FILIN		EARCH FEES		ATION FEES				
Application Type	Fee (\$)	Small Entity Fee (\$) Fee	Small Entity \$) Fee (\$)	(Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)			
Utility	300	150 500		200	100				
Design	200	100 100		130	65				
Plant	200	100 300		160	80				
Reissue	300	150 500		600	300				
Provisional	200	100		0	0				
	200	100 (, 0	U	U	Small Entity			
2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$)									
Fee Description Each claim over 20 (including Reissues) 50 25									
Each independent claim over 3 (including Reissues) 200 100									
Multiple dependent claims 360 180									
•		Paid (\$)	Mu	Itiple Depende	nt Claims				
-= x =				_		ee Paid (\$)			
HP = highest number of total clai		greater than 20.							
Indep. Claims Extra Claims Fee (\$) Fee F			Paid (\$)						
HP = highest number of independ		id for, if greater than 3.							
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 (round up to a whole number) × =									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 2255 Extension for response within fifth month 1,080.00									
SUBMITTED BY									
Signature Gib	7		Registration No. (Attorney/Agent)	55,661	Telephone	(212) 596-9479			
Name (Print/Type) Erika Takeuchi Date February 21, 2007									

Express Mail, Airbill No. EV93003	25218US, on the date shown belo	w in an envelope add	closed) is being deposited with the U.S. F dressed to: MS Amendment, Commission	
P.O. Box 1450, Alexandria, VA 2	22313-1450.	$\triangle A \cap A$		
P.O. Box 1450, Alexandria, VA 2 Dated: <u>February 21, 2007</u>	Signature: OM Vu	Glube	(Linda Blake)	